

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR ~~WELL~~ - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico September 1, 1960
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company John Charles Well No. 7, in SE 1/4 SW 1/4,
(Company or Operator) (Lease)
N Sec. 13, T. 27N, R. 9W, NMPM, Undesignated - Dakota Pool
Unit Letter
San Juan

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
	X		

County. Date Spudded May 6, 1960 Date Drilling Completed June 2, 1960
Elevation 6007 DF Total Depth 6680 PSTC 6631

Top ~~oil~~/Gas Pay 6373 Name of Prod. Form. Dakota

PRODUCING INTERVAL -

Perforations 6374 - 6390 6450-56 & 6464-80 w/4 holes per foot.

Open Hole _____ Depth _____ Casing Shoe 6676 Depth _____ Tubing 6344

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls. water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pilot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 950 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Back pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 40,000# sand and 53,205 gallons of crude oil

Casing _____ Tubing _____ Date first new
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Co.

Remarks: Shut in for pipeline connection

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved SEP 2, 1960 _____ 19____

Skelly Oil Company

(Company or Operator)

(Signed) P. E. Cosper

By: _____ (Signature)

OIL CONSERVATION COMMISSION

(Original Signed Emory C. Arnold)

By: _____

Title District Superintendent

Send Communications regarding well to:

Title Supervisor Dist. # 3

Name SKELLY OIL COMPANY

Box 426 ORANGE 510

Address Farmington, New Mexico

STATE OF NEW MEXICO
OIL CONSERVATION COMMISSION
AZTEC DISTRICT OFFICE

NUMBER OF COPIES RECEIVED

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